Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA												THAN	
<u></u>	O: A1846	<del></del> _	(Column	า 1)	(Colt	umn 2)		TYPE		OR		SMALL ENTITY	
L	OTAL CLAIMS	; 	10	<del>,</del>			[	RATE	FEE	]	RATE	FEE	
FC	OR		NUMBER	NUMBER FILED		BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			<del>                                     </del>	<b>A</b> minus 20=				XS 9=		OR	X\$18=		
INI	DEPENDENT C	LAIMS .	」 3 mi	inus 3 =	-			X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	<b>†</b>	OR	÷290=		
* If	f the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	L	TOTAL	385'	OR	TOTAL		
	C	LAIMS AS F	MENDEC	MENDED - PART II				, 0	م ماريخ	<b>1</b> 0	OTHER	THAN	
	<del></del>	(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum	nn 2)	(Column 3)	<b>س</b> م ا	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**	· .	=		XS 9=		OR	X\$18=		
AME	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MU	JETIPLE DE-	2ENDEIN1	CLAIM			+145=		OR	+290=		
							L	TOTAL		┧╮╻╵	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	nn 2)	(Column 3)	· AL	DDIT. FEE			ADDII. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMB PREVIOI PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
<b>AMENDMENT</b>	Incependent		Minus	***		=		X43=		OR	X86=		
<u> </u>	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			+145=			+290=		
						·	L	TOTAL DIT. FEE		OR OR	TOTAL ADDIT. FEE	•	
		(Column 1)		(Colum		(Column 3)	70	/DII. FEE =		,	(DDH), I EEE		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total		Minus	**		= ,	<b>\[</b> ;	X\$ 9=		OR	X\$18=		
AME	Independent	L	Minus	***	•	=	;	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEPI	ENDENT	CLAIM			145_		Ī	. 200-	-	
• If	the entry in colur		145=		OR L	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													